

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY	
Caption in Compliance with D.N.J. LBR 9004-1(b)	
Robert A. Loefflad, Esquire NJ Bar ID# 024791996 Ford, Flower, Hasbrouck & Loefflad Post Office Box 405 Linwood, New Jersey 08221 Tel (609) 653-1500 Fax (609) 653-8887	
In Re:	Case No.: 19-15427
Alicia J. Matarazzo	Chapter: 13
	Adv. No.:
	Hearing Date:
	Judge: JNP

CERTIFICATION OF SERVICE

1. I, Melissa Decker :
- ☐ represent _____ in this matter.
- ☒ am the secretary/paralegal for Robert A. Loefflad, who represents
_____ Debtor _____ in this matter.
- ☐ am the _____ in this case and am representing myself.
2. On 5/24/2019, I sent a copy of the following pleadings and/or documents
to the parties listed in the chart below.
Modified Chapter 13 Plan
3. I certify under penalty of perjury that the above documents were sent using the mode of service
indicated.

Date: 5/24/2019



/s/ Melissa Decker

Signature

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
US Department of Housing and Urban Development c/o Novad Management Consulting, LLC 2401 W. 23rd Street, Suite 1A1 Oklahoma City, OK 73107	Secured Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
US Department of Housing and Urban Development 451 7th Street S.W. Washington, DC 20410	Secured Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
United States Department of Education Claims Filing Unit PO Box 8973 Madison, WI 53708-8973	Unsecured Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)